

JUN 21 2006

DALY, CROWLEY, MOFFORD & DURKEE, LLP

Telephone: 781-401-9988
Facsimile: 781-401-9966

FACSIMILE TRANSMITTAL SHEET

Including this transmittal sheet, document consists of 3 pages.

Date: June 21, 2006

To: **Commissioner for Patents**

From: **Donald F. Mofford, Esq.**

Examiner: **Eric V. Woods**

Group Art: **2628**

Company: **U.S. PTO**

Facsimile Number: **571-273-8300**

Telephone Number:

MESSAGE

RE: **U.S. Patent Application of Philip J. Kellman, et al.**
Entitled: **System and Method for Representation of Aircraft Altitude Using Spatial Size And Other Natural Perceptual Cues**
Filed on: **February 8, 2002**
U.S. Appl. No.: **10/071,670**
Our Ref. No.: **RTN-173PUS**

PLEASE CONFIRM RECEIPT OF THIS FACSIMILE TRANSMISSION.

THANK YOU.

STATEMENT OF CONFIDENTIALITY

The documents included with this facsimile transmittal sheet contain information which is confidential and/or privileged. The information is intended to be for the use of the addressee named on this transmittal sheet. If you are not the addressee, note that any disclosure, photocopying, distribution or use of the contents of this faxed information is prohibited. If you have received this facsimile in error, please notify us by telephone (collect) immediately so that we can arrange for the retrieval of the original documents at no cost to you.

**IF THERE IS A PROBLEM WITH THIS TRANSMISSION, OR IF YOU DID NOT
RECEIVE ALL PAGES, PLEASE CALL 781-401-9988 AS SOON AS POSSIBLE**

\\server01\client_files\Prolaw documents\RTN-173PUS\31287.doc

JUN 21 2006

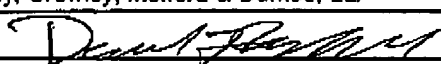
PTO/SB/21 (09-04)


Approved for use through 07/31/2008. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/071,670	
	Issue Date	February 8, 2002	
	First Named Inventor	Phillip Kellman	
	Art Unit	2628	
	Examiner Name	Eric V. Woods	
Total Number of Pages in This Submission	2	Attorney Docket Number	RTN-173PUS

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC Appeal Notice, Brief, Reply Brief <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks In the event a petition for extension of time is required by this paper and not otherwise provided, such petition is hereby made and authorization is provided herewith to charge deposit account No. 50-0845 for the cost of such extension.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Daly, Crowley, Mofford & Durkee, LLP	
Signature		
Printed name	Donald F. Mofford	
Date	6-21-06	Reg. No. 33,740

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature		
Typed or printed name	Donald F. Mofford	Date 6-21-06

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

JUN 21 2006

PTO/SB/122 (01-06)

Approved for use through 12/31/2008. OMB 0851-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**CHANGE OF
CORRESPONDENCE ADDRESS
Application**Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	10/071,670
Filing Date	February 8, 2002
First Named Inventor	Philip Kellman
Art Unit	2628
Examiner Name	Eric V. Woods
Attorney Docket Number	RTN-173PUS

Please change the Correspondence Address for the above-identified patent application to:

☒ The address associated with
Customer Number:

33164

OR

☐ Firm or
Individual Name Donald F. MoffordAddress Daly, Crowley, Mofford & Durkee, LLP
354A Turnpike Street, Suite 301A

City Canton

State MA

Zip 02021-2714

Country USA

Telephone 781.401.9988

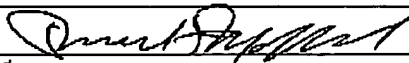
Email dfm@dc-m.com

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

- ☐ Applicant/Inventor
- ☐ Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or agent of record. Registration Number 33,740
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature

Typed or Printed
Name

Donald F. Mofford

Reg. No. 33,740

Date

6-21-06

Telephone

781.401.9988 ext. 13

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

☒ Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.